

NCSL Rural Health Regional Roundtable MAY 19, 2023



Montana Primary Care Association

Big Sky Country

Geography: 4th largest state in the nation

Population: 1,052,343 (2023)

- Cattle population: 2,160,000 (2023)

45 of 56 Montana counties are designated frontier

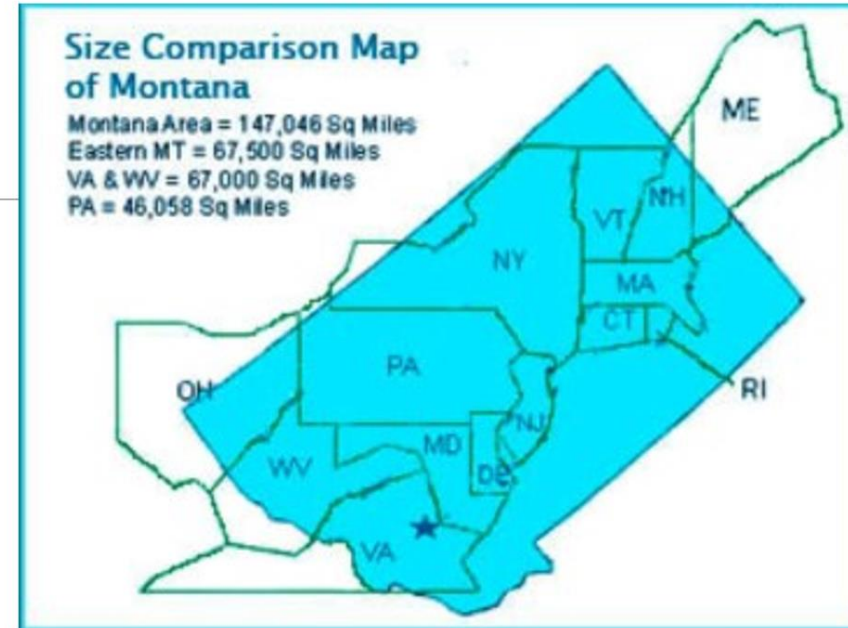
- Frontier: 6 or fewer people/square mile
- 10 are classified as rural
- 1 is classified as urban

By comparison:

- Washington DC has 10,984 people/square mile compared to Montana's 8th and 9th largest cities with populations of just under 10,000 people in total.

7 reservations and a large American Indian populations (6.5% of population)

Estimated that by 2030, Montana will be one of ten states in the country to have more people over the age of 65 than under the age of 18



Montana Primary Care Association

Mission: to promote integrated primary healthcare to achieve health and well-being for Montana's most vulnerable populations.

MPCA Vision:
Health equity for all Montanans

MPCA Values:
Collaboration
Integrity
Innovation

MPCA's Membership:

**Montana-based federally
qualified health centers
(FQHCs or CHCs)**

**Montana-based Urban Indian
Organizations (since 2018)**

WHAT IS A PCA?

PCAs were established to create economies of scale for health centers, maximize the federal Section 330 investments in states, assess and monitor the policy and regulatory environments, and assist health centers in adapting to changing demands from an evolving health care environment.

**OPERATIONS: Training and
Technical Assistance to members**

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**INNOVATION: Real time
response to emerging issues**

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**POLICY: State and federal policy
engagement**

Training and Technical Assistance

GRANTS (Federal funds or State funds that are federal passthrough)

- Bureau of Primary Health Care Cooperative Agreement
- Health Center Controlled Network Grant
- State contract for substance use disorder training (DPHHS)
- State contract for cancer prevention (DPHHS)
- Partnership Grants: RoMoNoh; RCORP, AHEC workforce, etc.
- CMS Navigator Grant

Year	All Trainings	All Participants	Webinars	Webinar Participants	In-Person	In-Person Participants
2022	236	4,258	216	3,410	20	847
2021	248	4,258	244	3,953	4	305
2020	207	3,498	196	3,298	11	200
2019	143	2,667	79	936	64	1731

Policy	Federal	State
<p>Policy/ Lobbyist *** non-government funds</p>	<ul style="list-style-type: none"> • Federal delegation: 2 Senators, 2 Congressional Representatives • Legislation: funding, FQHC/UIO programs, workforce, safety net programs • Agency Rule-making: HHS; HRSA; BPHC; CMS; and SSA. • Executive Orders 	<ul style="list-style-type: none"> • State legislature: 50 Senators, 100 Representatives • Biennial legislative sessions + interim committees • Legislation: access to quality healthcare; workforce; health equity for all; and health care infrastructure. • Agency Rule-making: DPHHS and Dept. of Labor. • Administrative Boards: behavioral health; dentistry; medical examiners; nursing; and pharmacy.

ACCESS: Medicaid; increase/preserve access to primary care, dental care, behavioral health, substance use treatment, pharmacy, and enabling services; health insurance issues and reform.



WORKFORCE: licensing barriers and scope of practice; reimbursement; training and educational opportunities.



EQUITY: social determinants of health; special populations with healthcare disparities.



INFRASTRUCTURE: health IT and systems; broadband; public health funding; housing investments.

STATE POLICY ENGAGEMENT

- Interim: health center tours, community meetings; grassroots education; and policy development.
- Pre-session: statewide tour with newly elected members, coalition engagement; bill-tracking; and bill drafting with legislative staff.
- Session: member engagement; advocacy training for members; Capitol Hill day; relationship-building; grassroots and direct lobbying.



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